Case 07-05209 Doc 1 Filed 03/23/07 Entered 03/23/07 11:28:58 Desc Main Document Page 1 of 14

Official Form 1 (10/06)			. ug	0				
	States Bankruj othern District of		urt				Volunta	ry Petition
Name of Debtor (if individual, enter Last, First, Eaton, Obie Richard		Name o	f Joint De	ebtor (Spouse	e) (Last, First	, Middle):		
All Other Names used by the Debtor in the last (include married, maiden, and trade names):		All Othe	er Names married,	used by the I maiden, and	Joint Debtor trade names	in the last 8 years):		
Last four digits of Soc. Sec./Complete EIN or ot xxx-xx-1461	her Tax ID No. (if more tha	n one, state all)	Last fou	r digits o	f Soc. Sec./C	omplete EIN	or other Tax ID No	(if more than one, state all
Street Address of Debtor (No. and Street, City, a 8715 S. Kingston Chicago, IL	,		Street A	ddress of	Joint Debtor	(No. and St	reet, City, and State)	
	606	IP Code						ZIP Code
County of Residence or of the Principal Place of Cook			County	of Reside	ence or of the	Principal Pla	ace of Business:	
Mailing Address of Debtor (if different from stre	eet address):		Mailing	Address	of Joint Debt	tor (if differe	nt from street address	ss):
	Z	IP Code						ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):	<u> </u>							
Type of Debtor	Nature of B	usiness			Chapter	of Bankru	otcy Code Under W	Vhich
(Check one box) ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)		Estate as defi (51B) Entity pplicable) mpt organiza e United Sta	ation ates	defined	er 9 er 11 er 12	of Close Consumer debts, \$ 101(8) as idual primarily	for	oceeding or Recognition
Filing Fee (Check or	ne box)		Check of	ne box:		Chapter 11	Debtors	
■ Full Filing Fee attached □ Filing Fee to be paid in installments (applica attach signed application for the court's cons is unable to pay fee except in installments. R □ Filing Fee waiver requested (applicable to cl attach signed application for the court's cons	ideration certifying that to dule 1006(b). See Official Inapter 7 individuals only	the debtor Form 3A.	Check at Che	Debtor is f: Debtor's a o insidera Il applica A plan is Acceptan	not a small b aggregate nor s or affiliates) ible boxes: being filed w ces of the pla	usiness debto necontingent 1) are less than ith this petiti n were solici		J.S.C. § 101(51D). cluding debts owed one or more
Statistical/Administrative Information ☐ Debtor estimates that funds will be available	for distribution to unsec	ured creditor	rs.			THIS	SPACE IS FOR COU	RT USE ONLY
■ Debtor estimates that, after any exempt prop there will be no funds available for distributi			xpenses	paid,				
Estimated Number of Creditors	on to unsecured creditors	o.				-		
1- 50- 100- 200-			,001-	100,001-	OVER			
49 99 199 999 ■ □ □ □	5,000 10,000 25		,000 	100,000	100,000			
Estimated Assets						1		
\$0 to \$10,000 to \$100,000	\$100,001 to \$1 million	\$1,000,00 \$100 mill		_	ore than 00 million			
Estimated Liabilities \$\Boxed{\subseteq} \\$ \$50,001 to	□ \$100,001 to	\$1,000,00	01 to	□ м	ore than			
\$50,000 \$100,000	\$1 million	\$1,000,00 \$100 mill			ore than 00 million			

Case 07-05209 Doc 1 Filed 03/23/07 Entered 03/23/07 11:28:58 Desc Main

Document Page 2 of 14

Official Form	1 (10/06)		FORM B1, Page 2		
Voluntar	y Petition	Name of Debtor(s): Eaton, Obie Richard			
(This page mu	st be completed and filed in every case)				
	All Prior Bankruptcy Cases Filed Within Las		•		
Location Where Filed:	- None -	Case Number:	Date Filed:		
Location Where Filed:		Case Number:	Date Filed:		
Pe	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more than	one, attach additional sheet)		
Name of Debt - None -	or:	Case Number:	Date Filed:		
District:		Relationship:	Judge:		
	Exhibit A		hibit B		
forms 10K a pursuant to S	oleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 sting relief under chapter 11.)	I, the attorney for the petitioner named have informed the petitioner that [he of 12, or 13 of title 11, United States Code 12].	whose debts are primarily consumer debts.) in the foregoing petition, declare that I r she] may proceed under chapter 7, 11, le, and have explained the relief available ify that I delivered to the debtor the notice		
□ Exhibit	A is attached and made a part of this petition.	X_/s/ Christine R. Piesiecki	March 23, 2007		
	a attached and made a part of and perturbin	Signature of Attorney for Debtor(s) Christine R. Piesiecki			
	Exh	nibit C			
	or own or have possession of any property that poses or is alleged to	pose a threat of imminent and identifiable	harm to public health or safety?		
☐ Yes, and ☐ No.	Exhibit C is attached and made a part of this petition.				
		nibit D			
_	leted by every individual debtor. If a joint petition is filed, ea	•	separate Exhibit D.)		
1	D completed and signed by the debtor is attached and made	a part of this petition.			
If this is a joi	nt petition: D also completed and signed by the joint debtor is attached a	and made a part of this petition.			
	Information Regardin				
	(Check any ap				
-	Debtor has been domiciled or has had a residence, princip days immediately preceding the date of this petition or for	al place of business, or principal asset	s in this District for 180 n any other District.		
	There is a bankruptcy case concerning debtor's affiliate, go				
	Debtor is a debtor in a foreign proceeding and has its print this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District.	s in the United States but is a defendar the interests of the parties will be serve	nt in an action or d in regard to the relief		
	Statement by a Debtor Who Resides (Check all app		y		
	Landlord has a judgment against the debtor for possession	of debtor's residence. (If box checked,	complete the following.)		
	(Name of landlord that obtained judgment)				
	(Address of landlord)				
	Debtor claims that under applicable nonbankruptcy law, the permitted to cure the entire monetary default that gave rise possession was entered, and				
	Debtor has included in this petition the deposit with the coafter the filing of the petition.	ourt of any rent that would become due	e during the 30-day period		

Document

Entered 03/23/07 11:28:58 Desc Main Page 3 of 14

FORM B1, Page 3

Official Form 1 (10/06)

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Eaton, Obie Richard

Signatures

Signature(s) of Debtor(s) (Individual/Joint) Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition I declare under penalty of perjury that the information provided in is true and correct, that I am the foreign representative of a debtor in a foreign this petition is true and correct. proceeding, and that I am authorized to file this petition.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Obie Richard Eaton

Signature of Debtor Obie Richard Eaton

 \mathbf{X}

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

March 23, 2007

Date

Signature of Attorney

X /s/ Christine R. Piesiecki

Signature of Attorney for Debtor(s)

Christine R. Piesiecki 6196644

Printed Name of Attorney for Debtor(s)

Christine R. Piesiecki

Firm Name

9800 S. Roberts Rd., Suite 205 Palos Hills, IL 60465

Address

Email: polskadwokat@aol.com

708-233-6833 Fax: 708-233-6834

Telephone Number

March 23, 2007

Date

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

Case 07-05209 Doc 1 Filed 03/23/07 Entered 03/23/07 11:28:58 Desc Main Document Page 4 of 14

Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court Northern District of Illinois

Obie Richard Eaton		Case No.	
	Debtor(s)	Chapter	7
	Debtor(s)	Chapter	

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.] ____

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

Case 07-05209 Doc 1 Filed 03/23/07 Entered 03/23/07 11:28:58 Desc Main Document Page 5 of 14

Official Form 1, Exh. D (10/06) - Cont.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor:	/s/ Obie Richard Eaton	
	Obie Richard Eaton	

requirement of 11 U.S.C. § 109(h) does not apply in this district.

Date: March 23, 2007

Case 07-05209 Doc 1 Filed 03/23/07 Entered 03/23/07 11:28:58 Desc Main Page 6 of 14 Document

Official Form 6D (10/06)

In re	Obie Richard Eaton		Case No.
_		Debtor ,	

SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P.

name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CDEDITION ON A ME	C	Hu	sband, Wife, Joint, or Community	Ç	U	D	AMOUNT OF	
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C J H	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	Z Q D < F E	ISPUTED	CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 921000319068			first mortgage	T	T E D			
Freemont Investment & Loan 1065 N. Pacific Center Drive Anaheim, CA 92806		-	1403 S. Clark Chicago, IL 60605		ט		000 000 00	0.00
Account No. 921000323575	╅		Value \$ 775,000.00 1403 S. Clark	+			620,000.00	0.00
Freemont Investment & Loan 1065 N. Pacific Center Drive Anaheim, CA 92806		-	Chicago, IL 60605					
			Value \$ 775,000.00				155,000.00	0.00
Account No. 44110XXXX Homecoming Financial 2711 N. Haskell Avenue Dallas, TX 75204		-	8715 S. Kingston Chicago, IL 60617					
			Value \$ 270,000.00				216,000.00	0.00
Account No. 656005001XXXX Irwin Mortgage Corporation 1431 Opus Pl. #513 Downers Grove, IL 60515		_	8715 S. Kingston Chicago, IL 60617					
			Value \$ 270,000.00				54,000.00	0.00
0 continuation sheets attached			(Total of	Subt			1,045,000.00	0.00
			(Report on Summary of		ota lule		1,045,000.00	0.00

Case 07-05209 Doc 1 Filed 03/23/07 Entered 03/23/07 11:28:58 Desc Main Document Page 7 of 14

Official Form 6E (10/06)

In re	Obie Richard Eaton	Case No	
_		Debtor	

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate
continuation sheet for each type of priority and label each with the type of priority.
The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m).
If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)
Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.
Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data.
Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trust or the order for relief. 11 U.S.C. \S 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$4,925* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,225* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered provided. 11 U.S.C. § 507(a)(7).
■ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
Claims for death or personal injury while debter was interiored

☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

___ continuation sheets attached

^{*} Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 07-05209 Doc 1 Filed 03/23/07 Entered 03/23/07 11:28:58 Desc Main Page 8 of 14 Document

Official Form 6E (10/06) - Cont.

In re	Obie Richard Eaton		Case No.	
_		Debtor		

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts

Owed to Governmental Units TYPE OF PRIORITY Husband, Wife, Joint, or Community CODEBTOR UNLIQUIDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT SPUTED AND MAILING ADDRESS Н AMOUNT DATE CLAIM WAS INCURRED INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) Account No. 349-52-1461 30,000.00 **ICS Payment and Correspondence** Unit P.O. Box 19043 Springfield, IL 62794-9043 30,000.00 0.00 Account No. Account No. Account No. Account No. Subtotal 30,000.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) 30,000.00 Schedule of Creditors Holding Unsecured Priority Claims 0.00 30,000.00 (Report on Summary of Schedules) 30,000.00 0.00

Case 07-05209 Doc 1 Filed 03/23/07 Entered 03/23/07 11:28:58 Desc Main Page 9 of 14 Document

Official Form 6F (10/06)

In re	Obie Richard Eaton	Case No.
-		Debtor ,

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the

claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

<u> </u>			•				
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J C		G E N	N L Q D	DISPUTED	AMOUNT OF CLAIM
Account No. 6378				Т	Е		
Bankfirst PO Box 5052 Sioux Falls, SD 57117-5052		-			D		1,092.13
Account No. 0963							
Capital One 15000 Capital One Drive Richmond, VA 23238		-					8,104.35
Account No. 0787		H				┢	
Capital One 15000 Capital One Drive Richmond, VA 23238		-					481.14
Account No. 9298							
Capital One 15000 Capital One Drive Richmond, VA 23238		_					518.57
				l Salb 4	L	<u>L</u>	
3 continuation sheets attached			(Total of t	Subt his j			10,196.19

Case 07-05209 Doc 1 Filed 03/23/07 Entered 03/23/07 11:28:58 Desc Main Document Page 10 of 14

Official Form 6F (10/06) - Cont.

In re	Obie Richard Eaton		Case No.	
_		Debtor	-,	

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

AND MAINN AND MAINN ADDRESS AND ACCOUNT NUMBER (See instructions above.) Account No. 0399 Chase 800 Brooksedge Blvd. Westerville, OH 43081 Account No. 1002656302 Chrysler Financial P.O. Box 5500 Detroit, MI 48255-2494 Account No. 295024487 Cingular Wireless P.O. Box 6428 Carol Stream, IL 60197-6428 Account No. Com Ed Attn.: Credit Dept. 2100 Swift Dr. Oak Brook, IL 60523 Account No. 0081 Orchard Bank/HSBC Card Services PO Box 80084 Salinas, CA 93912-0084 Salinas, CA 93912-0084		16	1	1 1 1 1 1 2 2 2	1.		_	
See instructions above. R C IS SUBJECT TO SETOFF, SO STATE. R D D D D D D D D D	AND MAILING ADDRESS INCLUDING ZIP CODE,	CODEB	H W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTL	DNLLQ	ローのPU	AMOUNT OF CLARA
Chase 800 Brooksedge Blvd. Westerville, OH 43081 -		O R		IS SUBJECT TO SETOFF, SO STATE.	N G E N	U D A	E D	AMOUNT OF CLAIM
Chase 800 Brooksedge Blvd. -	Account No. 0399				 	TED		
Account No. 1002656302 Chrysler Financial P.O. Box 5500 Detroit, MI 48255-2494	800 Brooksedge Blvd.		-					
Chrysler Financial P.O. Box 5500 Detroit, MI 48255-2494	Account No. 1002656302	+						4,924.08
P.O. Box 5500 Detroit, MI 48255-2494		1						
Account No. 295024487 Cingular Wireless P.O. Box 6428 Carol Stream, IL 60197-6428	P.O. Box 5500		-					
Cingular Wireless P.O. Box 6428 Carol Stream, IL 60197-6428								4,964.18
P.O. Box 6428 Carol Stream, IL 60197-6428	Account No. 295024487							
Account No. Com Ed Attn.: Credit Dept. 2100 Swift Dr. Oak Brook, IL 60523	P.O. Box 6428		-					
Com Ed Attn.: Credit Dept. 2100 Swift Dr. Oak Brook, IL 60523	Account No.							489.29
Attn.: Credit Dept. 2100 Swift Dr. Oak Brook, IL 60523		1						
Oak Brook, IL 60523 1,000.00 Account No. 0081 Orchard Bank/HSBC Card Services PO Box 80084 Salinas, CA 93912-0084 - 1,905.92			-					
Account No. 0081 Orchard Bank/HSBC Card Services PO Box 80084 Salinas, CA 93912-0084 - 1,905.92								
Orchard Bank/HSBC Card Services PO Box 80084 Salinas, CA 93912-0084 - 1,905.92	Oak Brook, 12 00323							1,000.00
PO Box 80084 Salinas, CA 93912-0084 - 1,905.92	Account No. 0081	1						
1,905.92	PO Box 80084		-					
Charters 4 of 2 shorts worked to Cabability of	,							1,905.92
Sheet no. <u>1</u> of <u>3</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims Subtotal (Total of this page)	Sheet no1 of _3 sheets attached to Schedule of							13,283.47

Case 07-05209 Doc 1 Filed 03/23/07 Entered 03/23/07 11:28:58 Desc Main Document Page 11 of 14

Official Form 6F (10/06) - Cont.

In re	Obie Richard Eaton	Case No.	
-		Debtor	

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CDEDITORIS MANTE	С	Н	usband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND	CONTINGEN	DZLLQULDAFE	ISPUTED	AMOUNT OF CLAIM
Account No. 2-5000-4332-2594				Т	T E D		
Peoples Energy Chicago, IL 60687-0001		-			D		
	_						638.32
Account No. 2418	┨						
Providian Financial P.O. Box 660509 Dallas, TX 75266		-					
							3,053.93
Account No. 0265	Τ						
Providian Financial P.O. Box 660509 Dallas, TX 75266		-					
							3,959.86
Account No. 9373894235	4						
Sallie Mae LSCF 1002 Arthur Dr. Lynn Haven, FL 32444-1683		-					
Account No. 4762	╁	-		-			6,735.22
US Bank PO Box 790408 Saint Louis, MO 63179-0408		-					1,300.00
Sheet no. 2 of 3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	f		(Total of	Sub this			15,687.33

Case 07-05209 Doc 1 Filed 03/23/07 Entered 03/23/07 11:28:58 Desc Main Page 12 of 14 Document

Official Form 6F (10/06) - Cont.

In re	Obie Richard Eaton	Case No	
· <u> </u>		Debtor	

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	Ic	П.,	usband, Wife, Joint, or Community	Tc	111	Г	
CREDITOR'S NAME,	CODEBTOR	1		COZF-	DZLLQD.	Ιĭ	
AND MAILING ADDRESS	E	Н	DATE CLAIM WAS INCURRED AND	T	ŀ	S	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	В	W	CONSIDERATION FOR CLAIM. IF CLAIM	I N	Q	Ų	AMOUNT OF CLAIM
(See instructions above.)	Ö	C	IS SUBJECT TO SETOFF, SO STATE.				AWOUNT OF CLAIM
· ·	L			NGENH	DATED	D	
Account No. 6190				T 1	ΙE		
	1			\Box	D		
US Bank							
PO Box 790408		-					
Saint Louis, MO 63179-0408							
							7,457.06
	L						7,407.00
Account No. 0265							
	1						
Washington Mutual							
P.O. Box 660487		-					
Dallas, TX 75266-0487							
,							
							5,117.64
				\perp			0,117.04
Account No. 2418							
	1						
Washington Mutual							
P.O. Box 660487		-					
Dallas, TX 75266-0487							
							3,122.69
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Account No.							
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Account No.	1						
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	_	1_		<u>,</u>	<u> </u>		
Sheet no. 3 of 3 sheets attached to Schedule of				Subt			15,697.39
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his j	pag	ge)	
				т	`ota	al	
			(Report on Summary of So				54,864.38
			(Report on Summary of Sc	IICU	ule	0)	

Bankfirst PO Box 5052 Sioux Falls, SD 57117-5052

Capital One 15000 Capital One Drive Richmond, VA 23238

Chase 800 Brooksedge Blvd. Westerville, OH 43081

Chrysler Financial P.O. Box 5500 Detroit, MI 48255-2494

Cingular Wireless P.O. Box 6428 Carol Stream, IL 60197-6428

Codilis & Associates, P.C. Bankruptcy Dept. 15W030 N. Frontage Rd, Suite 100 Burr Ridge, IL 60527

Com Ed Attn.: Credit Dept. 2100 Swift Dr. Oak Brook, IL 60523

Freemont Investment & Loan 1065 N. Pacific Center Drive Anaheim, CA 92806

Homecoming Financial 2711 N. Haskell Avenue Dallas, TX 75204

IRS
ICS Payment and Correspondence Unit
P.O. Box 19043
Springfield, IL 62794-9043

Irwin Mortgage Corporation 1431 Opus Pl. #513 Downers Grove, IL 60515

Orchard Bank/HSBC Card Services PO Box 80084 Salinas, CA 93912-0084

Peoples Energy Chicago, IL 60687-0001

Providian Financial P.O. Box 660509 Dallas, TX 75266

Sallie Mae LSCF 1002 Arthur Dr. Lynn Haven, FL 32444-1683

US Bank PO Box 790408 Saint Louis, MO 63179-0408

Washington Mutual P.O. Box 660487 Dallas, TX 75266-0487